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Bib Data Sheet

CONFIRMATION NO. 1607

SERIAL NUMBER 10/604,608	FILING DATE 08/04/2003 RULE	CLASS 715	GROUP ART UNIT 2178	ATTORNEY DOCKET NO. SBC 0122 PA
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** CONTINUING DATA *****

None KMA

** FOREIGN APPLICATIONS *****

None KMA

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 11/13/2003

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature: <i>Kristen D. [Signature]</i> Initials: <i>KMA</i>	STATE OR COUNTRY TX	SHEETS DRAWING 5	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 3
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TITLE

FLEXIBLE MULTIPLE SPREADSHEET DATA CONSOLIDATION SYSTEM

FILING FEE RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)